

MULTIPLE-DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

Serial No.

10/527037
Application

Filing Date

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				51	/	10	/			
2	/		/				52	/	0	/			
3	/		/				53	/					
4	/		/				54	/					
5	/		/				55	/					
6	/		/				56						
7	/		/				57						
8	/		/				58						
9							59						
10							60						
11	10		/				61						
12	18		/				62						
13	18		/				63						
14	10		/				64						
15	10		/				65						
16	10		/				66						
17	18		/				67						
18	18		/				68						
19	10		/				69						
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28	/		/				78						
29	/		/				79						
30	/		/				80						
31	100		/				81						
32	100		/				82						
33	100		/				83						
34	10		/				84						
35	10		/				85						
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41	/		/				91						
42	/		/				92						
43	/		/				93						
44	/		/				94						
45	/		/				95						
46	10		/				96						
47	10		/				97						
48	10		/				98						
49	10		/				99						
50	10		/				100						
TOTAL NO.	6	↓	4	↓		↓	TOTAL NO.	↓	↓	↓	↓		
TOTAL NO.	220	←	50	←		←	TOTAL NO.	↓	↓	↓	↓		
TOTAL CLAS.	226	5X					TOTAL CLAS.	↓	↓	↓	↓		
TOTAL CLAS.	226	5X					TOTAL CLAS.						

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